



Connecticut Community Transformation Grant Transforming Connecticut Communities

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The Community Transformation Grant (CTG)

- awarded by the Centers for Disease Control and Prevention
- 900 million in total grant funds
- awarded 61 states and communities throughout the United States
- five year project period
- conduct community transformation activities to reduce chronic disease rates, prevent the development of secondary health conditions, and address health disparities.
- serve approximately 120 million Americans.
- at least 20% of grant funds must be directed to rural and frontier areas



CTG Funding Two Levels


- **IMPLEMENTATION:** 35 states and communities – funded to implement evidence and practice-based policy, environmental, programmatic and infrastructure changes.
- **CAPACITY BUILDING:** 26 states and communities - funded to develop the human capital, skills, partnerships, and infrastructure necessary to implement evidence and practice-based policy, environmental, programmatic and infrastructure changes .
- Connecticut Department of Public Health was one of the 26 states and communities funded to build capacity in Connecticut's communities.



CTG's Five Strategic Directions

CTG supports **policy, environmental, programmatic, and infrastructure** changes related to five **strategic directions**:

1. Tobacco Free Living (**required**)
2. Active Living and Healthy Eating (**required**)
3. High Impact Quality Clinical and Other Preventive Services (**required, including HBP & HBC**)
4. Social and Emotional Wellness (**optional**)
5. Healthy and Safe Physical Environment (**optional**)



CTG Measures of Progress

Implementation and Capacity Building activities should demonstrate progress in performance measures outlined in the Affordable Care Act including:

- changes in weight
- changes in proper nutrition
- changes in physical activity
- changes in tobacco use
- changes in emotional wellbeing and overall mental health
- achieving health equity and eliminating disparities to improve the health of all groups



Justification for CTG Counties Selected

- **URBAN COUNTIES:** three largest urban counties in Connecticut (Fairfield, Hartford, and New Haven) have multiple resources available for addressing well-documented health disparities
- **RURAL COUNTIES:** five smaller counties in Connecticut, comprised of mostly small or rural towns, have limited resources for use across a larger geographic area, and have limited access to data with which to document need. Lacking the population density, these five counties are often overlooked when funds are distributed in the state, and their unique needs largely remain unmet.



Five Connecticut CTG Counties

Each of the 5 Counties have selected a Lead Fiduciary/Coordinating Agent that will lead the County in all CTG capacity building activities. The five counties and their Lead Fiduciary/Coordinating Agent are as follows:

1. Litchfield County/Torrington Health District
2. Middlesex County/Chatham Health District
3. New London County/Ledgelight Health District
4. Tolland County /Eastern Highlands Health District
5. Windham County/Northeast District Department of Health




CTG Mandated Capacity Building Activities for 5 Counties

- Establish or strengthen a multi-sectorial, county-wide coalition by conducting a local scan of existing coalitions, partnerships, workgroups and task forces involved in the 3 strategic directions for inclusion in the CTG county coalition.
- Ensure inclusion of all towns in the county as well as ensure representation from subgroups in their county experiencing health disparities.
- Conduct policy scans to identify gaps in existing policies, environments, programs, and infra-structure related to the 3 required Strategic Directions.



CTG Capacity Building Activities for 5 Counties (Continued)

- Conduct countywide health needs assessment and/or compile existing local health assessment data which must meet criteria as set forth by CDC including the burden of chronic diseases and identification of population subgroups experiencing health disparities.
- Meet with Leadership member organizations representing minority populations and/or population subgroups experiencing health disparities to determine methods of community engagement and to identify community organizations for representation on CTG County coalitions



The Connecticut Department of Public Health (DPH) has :

- Developed and executed formal contracts with the 5 County Lead Fiduciary Agents,
- Participated in CDC mandated trainings,
- Established a mentor/mentee relationship among funded counties,
- Met individually with each county to provide technical assistance and conduct assessment of county training needs and,
- Coordinated a “Data Sharing Day” to ensure accurate and easy access to data housed in DPH.



CDC Expectations

- CTG is led by a State Leadership Team
- Capacity Building Activities are completed in Years 01 – 02 of the grant.
- The two-year Capacity Building period may include pilot testing policies in select communities.
- Apply for continuation funding – Application due to CDC April 19, 2012.
- Move to full implementation status on September 2013.



Thank You and Questions

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